Case 15-26533

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B6A (Official Form 6A) (12/07)

In re Debra V. Levine

(If known)

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
none			T I JANK	T DOURT COURT OF THE PROPERTY
			UNITED STATES BANKE UNITED STATES BANKE NORTHERN DISTRICT AUG 19 JEFFREY P. ALLS PS REP	OF ILLINOIS 2015 TEADT, CLERK - DDS
		tal➤		

(Report also on Summary of Schedules.)

Case 15-26533

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B 6B (Official Form 6B) (12/07)

In re Debra V.

Levine	
Debtor	

Doc 8

Case No. 15-26533 (If known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash		100.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		See attached list + Metro Bank		875.00
Security deposits with public utilities, telephone companies, landlords, and others.		LL Security Deposit	TET	1,600.00
Household goods and furnishings, including audio, video, and computer equipment.		Living Room Set, Dining Room Set, 2 Bedfoord Sets, Kitchen Set, Chairs, Rugs, TV. Patren STATE Furniture  Books, pictures, Art	S BAN DISTRI	RRIPTET ILINOIS ET OF ILLINOIS 2015
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, pictures, Art	GI.	TOF ILLINOIS 1,100.00 2015 STEADT, CLERK 2,000.00 1,000.00
6. Wearing apparel.		Necessary Wearing Apparel		1,000.00
7. Furs and jewelry.		3 Fur Coats, Jewelry		1,000.00
8. Firearms and sports, photographic, and other hobby equipment.		Tennis Rackets, Bicycle, Photography Equipment		300.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	×			Mariana and the Shirth
10. Annuities. Itemize and name each issuer.	x			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	×			

In re Debra V. Levine ,	Case No. 15-26533
Debtor	(If known)

## **SCHEDULE B - PERSONAL PROPERTY**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		JP Morgan Chase: Investment plan		75.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		DVL Law Offices		2,000.00
14. Interests in partnerships or joint ventures. Itemize.	×			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X.			
16. Accounts receivable.		638 W. Grace St., Chicago, IL 60613.	880A KE KE	12,000.00
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	×			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	x			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A – Real Property.	×			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x			WARRAN PANTERS (SEELS)
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.				

Case 15-26533

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B 6B (Official Form 6B) (12/07) -- Cont.

Case No. 15-26533

In re Debra V. Levine Debtor

(If known)

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	x			
23. Licenses, franchises, and other general intangibles. Give particulars.	×			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	×			AMMERICANIST CONTRACTOR OF CON
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2001 Ford Tauras (78K Miles)		2,200.00
26. Boats, motors, and accessories.	×			
27. Aircraft and accessories.	×	<b>~</b>		
28. Office equipment, furnishings, and supplies.		2 computers, 2 fried computers, 3 laptops, office suppliesl, desk, sofa, bookcases		1,200.00
29. Machinery, fixtures, equipment, and supplies used in business.	×			
30. Inventory.	×		14,140,414	
31. Animals.	×			
32. Crops - growing or harvested. Give particulars.	×			
33. Farming equipment and implements.	×			
34. Farm supplies, chemicals, and feed.	×		garajana dal	
35. Other personal property of any kind not already listed. Itemize.	×			
,		continuation sheets attached Total	>	\$ 25,150.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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CHASE 4

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Search: How can we help you today?

Ortora

CHASE ONLINESM Wednesday, August 19, 2015

📇 Print

Welcome DVL LAW OFFICES LLC

M(4) Secure Message Center | Customize Accounts

debravlevine@yahoo.com | Last logged on at 2:45 PM ET on 08/16/2015 | See session summary

**Business and Personal** 

Business Only

Account Summary for DVL LAW OFFICES LLC

Personal Only

What can we do better? WE'RE LISTENING >

**Present Balance** 

Payments & Transfers

Make a transfer

Pay bills

Wire money

Pay a Person using Chase

QuickPay<sup>SM</sup>

Chase Paymentech Sign-On

**DVL LAW OFFICES LLC** 

Deposit accounts

**Business Accounts** 

\$0.00

**Personal Accounts Present Balance** 

**DEBRA VORHIES LEVINE** 

Deposit accounts

Investments

\$2.25 \$75.05

-- Symbol -- Get Quote Trade

**Investing** 

Go to Planning & Retirement

Study the markets

Create a list of your favorite accounts

**Customer Center** 

Try Chase Mobile

Manage Account Alerts

Change my Password

Change mailing address, phone

and/or email

Stop payment on a check

Delegate with Access and Security

Manager

Go to Download Center

Go to Customer Center

See statements

**Business Accounts** 

Account

**Deposit Accounts** 

**IOLTA ACCOUNT (...2937)** 

Pay bills

Available balance Make a transfer

See routing/account numbers

**BUS SELECT HY SAV (...7226)** 

Present balance Available balance

Present balance

\$0.00

\$0.00

\$0.00

\$0.00

Total balance: \$0.00

See statements

Make a transfer

See routing/account numbers

Personal Accounts

**Bank Accounts** 

Total balance: \$2.25

Account

Available Balance

Present Balance 🗟

CHASE PREMIER (...8941) See activity See statements

Pay bills

See routing/account numbers

\$2.24

CHASE PLUS SAVINGS (...8134)

\$0.01

\$2.24

See activity See statements

\$0.01 See routing/account numbers

Learn more about your checking account options

Investments\*

As of 9:54 AM ET 8/19/2015 Refresh https://chaseonline.chase.com/MyAccounts.aspx Attachment

8/19/2015

Filed 08/19/15 Entered 08/20/15 07:21:36 Desc Main Document Page 6 of 36 Case 15-26533 Doc 8

**Hide Details** 

Chase Investments<sup>3</sup>

Account

Change @

Account Value

**BROKERAGE** RETIREMENT (...9898)

\$0.00 (0.00%)

\$75.05

See portfolio

Trade

See documents

JPMorgan Chase Bank, N.A. Member FDIC Equal Opportunity Lender

Security | Terms of Use | Legal Agreements and Disclosures

#### \* Investment Disclosures

3Securities (including mutual funds and variable annuities) and investment advisory services are offered through J.P. Morgan Securities LLC (JPMS) or affiliated brokers/dealers. Annuities and insurance products are provided by various insurance companies and offered through Chase Insurance Agency, Inc. (CIA), a licensed insurance agency, doing business as Chase Insurance Agency Services, Inc. in Florida. JPMS, a member of FINRA 9/NYSE /SIPC , and CIA are affiliates of JPMorgan Chase Bank, N.A. Products not available in all states. The purchase of an insurance or annuity product is not a condition of any bank loan, service or product. For further Investment Related Disclosures, please visit our Legal Agreements and Disclosures.

> INVESTMENT ACCOUNTS AND **INSURANCE PRODUCTS ARE** NOT A BANK DEPOSIT

NOT FDIC-INSURED

**NOT INSURED BY ANY FEDERAL GOVERNMENT** AGENCY

NOT GUARANTEED BY MAY LOSE THE BANK

The values presented for the accounts are determined nightly or when available. Values for most publicly traded securities are based on the price of assets at the close of the stock market each day. For assets not priced daily (e.g., priced on a weekly, monthly or sporadic interval), these values reflect the value of that interval's pricing. The information presented is obtained from sources believed to be reliable, without express or implied warranties as to completeness or accuracy. We expressly disclaim any liability for errors and omissions regarding this information.

The term "Market Value" or "Value" represents the total value of the positions held in the account, including the sum of the settled long market securities positions, plus the settled short market securities positions and the cash balances held in the account. The term "Market Value" or "Value" does not take into consideration any margin loans or other obligations of J.P. Morgan Securities LLC (JPMS), any of their affiliates or any third parties in connection with the account.

JPMorgan Chase Bank, N.A. strictly prohibits the use of any account to conduct any transactions that are directly or indirectly related to unlawful Internet gambling or any other illegal activity. The customer agrees not to conduct any transactions through the account that directly or indirectly involve or are related to unlawful Internet gambling, including, without limitation, the acceptance or receipt of any funds or deposits in connection therewith.

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Case 15-26533 B6C (Official Form 6C) (04/13)

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In re Debra V. Levine

Debtor

Case No. 15-26533

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

☐ Check if debtor claims a homestead exemption that exceeds

☐ 11 U.S.C. § 522(b)(2)
☐ 11 U.S.C. § 522(b)(3)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

AUG 19 2015

DESCRIPTION OF PROPERTY	SPECIFY LAW JEFFR PROVIDING EACH EXEMPTION	EY P. ALLSTEADT, CLERK PS REP CLAMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Cash	735 ILCS 5/12-1001(b)	0.10	100.00
Bank Accounts	735 ILCS 5/12-1001(b)	875.00	875.00
LL Security Deposit	735 ILCS 5/12-1001(b)	1,600.00	1,600.00
Household goods and furnishings	735 ILCS 5/12-1001(b)	1,100.00	1,100.00
Books, pictures, art	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Necessary Wearing Apparel	735 ILCS 5/12-1001(a)(e)	1,000.00	1,000.00
3 Fur Coats, jewelry	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Tennis Rackets, bicycle, photography equipment	735 ILCS 5/12-1001(b)	300.00	300.00
JP Morgan Chase; Investment Plan	735 ILCS 5/12-1006	75.00	75.00
DVL Law Offices		2,000.00	2,000.00
Accounts Receivable	The come of the belonger	12,000.00	10,200.00

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

	Case	15-2	2653
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Desc Main

In re Debra V. Levine

D	ebi	or

Case No. 15-26533

(If known)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Check one box)	Check if debtor claims a homestead exemption that exceeds \$155,675.*
11 U.S.C. § 522(b)(2)  11 U.S.C. § 522(b)(3)	

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
2001 Ford Tauras (78K mi.)	735 ILCS 5/12 1001(c)	2,500.00	2,200.00
2 computers, 2 fried computers, 3 laptops, etc	735 ILCS 5/12 1001(d)	1,200.00	1,200.00

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B 6D (Official Form 6D) (12/07)

In re Debra V. Levine,	Case No. 15-26533
Debtor	(If known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

			•		•			
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.							TED STATES BANKRUPTCY OF ILLINORTHERN DISTRICT	
			VALUE \$				101	CLERK
ACCOUNT NO.			VALUE \$			J	EFFREY P. ALLSTEADT PS REP DI	<b>)</b>
ACCOUNT NO.			VALUE \$					
continuation sheets	*		Subtotal ► (Total of this page)				\$	\$
attached			Total ►  (Use only on last page)				\$	\$
			, , ,			·	(Report also on Summary of Schedules.)	(If applicable, report

Summary of Certain Liabilities and Related

Data.)

B 6D (Official Form 6D) (12/07) - Cont.

In re Debra V. Levine

Case No. 15-26533

Debtor

(if known)

2

of Certain Liabilities and Related Data.)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.								
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.	·		VALUE \$			The state of the s		
ACCOUNT NO.	- H. &		VALUE \$		***************************************			
Sheet noofcontinue	ation		VALUE \$ Subtotal (s)	***************************************			\$	<b>6</b>
heets attached to Schedule of Creditors Holding Secured Claims			(Total(s) of this page)				Φ	\$
Junto			Total(s) ► (Use only on last page)		٠		\$ (Report also on Summary of Schedules.)	\$ (If applicable, report also on Statistical Summary of Contain

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B6E (Official Form 6E) (04/13)

In re Debra V. Levine	Case No. 15-26533
Debtor	(if known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Returned Data. UNITED STATES BANKRUPTCY COURT Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedul ADRTHERN DISTRICT OF ILLINOIS TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attacked shales) 2015 Domestic Support Obligations JEFFREY P. ALLSTEADT, CLERK Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the Reservation parein Designation or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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In re Debra V. Levine ,	Case No. 15-26533  (if known)
Certain farmers and fishermen	
Deposits by individuals	or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Claims of individuals up to \$2,775* for deposits for the purchase, le that were not delivered or provided. 11 U.S.C. § 507(a)(7).  Taxes and Certain Other Debts Owed to Governmental Units	ase, or rental of property or services for personal, family, or household use,
Taxes, customs duties, and penalties owing to federal, state, and local	al governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depositor	ry Institution
Claims based on commitments to the FDIC, RTC, Director of the Of Governors of the Federal Reserve System, or their predecessors or suc § 507 (a)(9).	ffice of Thrift Supervision, Comptroller of the Currency, or Board of cessors, to maintain the capital of an insured depository institution. 11 U.S.C
Claims for Death or Personal Injury While Debtor Was Intoxic	cated
Claims for death or personal injury resulting from the operation of a drug, or another substance. 11 U.S.C. § 507(a)(10).	motor vehicle or vessel while the debtor was intoxicated from using alcohol,
* Amounts are subject to adjustment on 4/01/16, and every three years adjustment.	thereafter with respect to cases commenced on or after the date of

\_\_\_\_ continuation sheets attached

Case 15-26533

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B6E (Official Form 6E) (04/13) - Cont.

In re	Debra V. Levine	
	Debtor	 

Case No. 15-26533

(if known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

						,	Type of Priority f	or Claims Listed	on this sheet
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Account No.									
									Managara area area area area area area area
Account No.									
		7000			į				
Account No.							W. #		
								*	
Sheet noofcontinuation sheets attach Creditors Holding Priority Claims	ed to Sch	edule of	(To	Sotals of	ubtotal this pa		\$	\$	
			Total (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)				\$		
			Totals (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)					\$	\$

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B 6F (Official Form 6F) (12/07) In re Debra V. Levine

Debtor

Doc 8

Case No. 15-26533

(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data...

☐ Check this box if debtor has no	credito	rs holding uns	ecured claims to report on this Sched	lule F.				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	CLA	UNT OF AIM
ACCOUNT NO 2155			Collection for First National	, I	I	WINT O	Y COURT	
LTD Financial Services 7322 Southwest Freeway			Credit Card LTD Ref. No. UNIT	D STAT	DISTR	CT OF	Y COURT LINOIS	
Suite 1600 Houston, TX 77074-2053								εK
ACCOUNT NO. 0278			Medical	nev	o ALI	STEA	01,644 505	***
Chicago Ortho & Sports Medicine P.O. Box 3179 Carol Stream, IL 60132-3179		10 10 10 10	12/15 <b>J</b> EF	PS	RE	P \	DT, CLER DDS	404.00
ACCOUNT NO.			Medical					
Swedish Covenant Medial Group 7452 Solution Center Chicago, IL60613								25.96
ACCOUNT NO. 5426		-	Credit Card					
Ann Taylor P.O. Box 659705 San Antonio, TX 78265-9705		The state of the s	Clothing				•	1,505.00
					Subt	otal>	\$	1,934.96
Continuation sheets attached  (Use only on last page of the completed Schedule F.)  (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)								

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B 6F (Official Form 6F) (12/07)

In re Debra V. Levine

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	Dahtan	

Case No. 15-26533

(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF DATE CLAIM WAS CREDITOR'S NAME, JNLIQUIDATED CONTINGENT CODEBTOR **CLAIM** INCURRED AND **MAILING ADDRESS** DISPUTED CONSIDERATION FOR INCLUDING ZIP CODE, CLAIM. AND ACCOUNT NUMBER (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Legal Services ACCOUNT NO. 11/5/14-4/30/15 Scalon Law Office 1,775.00 1750 North Wells Street, Suite 205 Chicago, IL 60614 Credit Card ACCOUNT NO. 5370 **Primarily Business** Bank of America 2003-4/7/15 16.984.00 P.O. Box 85100 Dallas, TX 75285-1001 Credit Card ACCOUNT NO. 9614 2003-4/7/15 Bank of America 5,606.00 P.O. Box 85100 Dallas, TX 75285-1001 Credit Card ACCOUNT NO. 2003-4/7/15 Bank of America 3,500.00 P.O. Box 85100 Dallas, TX 75285-1001 27.865.00 Subtotal> continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re Debra V. Levine	,	Case No. 15-26533
Debtor		(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.4404  Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492			Credit Card 2000-4/18/15 Charged Off				7,500.00
ACCOUNT NO. 0418  Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492			2000-3/18/15				2,500.00
ACCOUNT NO. 5230  Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492			2000-4/18/15				907.00
ACCOUNT NO.  Dan Mirjanich, CPA CompuAccounting, Ltd. 23 S. River Rd-Suite 116 Des Plaines, IL 60618			2009 to present				2,500.00
N. Patel, MD SBSQ Hospital			Claims Emergency Room Visit on10/1/14, refered by Dr. Mary Fry, but I did not even meet her until 11/5/15	and the second section of the sectio	×		208.00
Sheet no. 3 of 17 continuation sheet no. 6 Creditors Holding Unsecure Nonpriority Claims		ched			Subt	total⊁	\$ 13,615.00
Total ➤ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)					ule F.) tistical	\$	

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B 6F (Official Form 6F) (12/07)

In re Debra V. Levine

r.	Lake		

Case No. 15-26533

(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY AMOUNT OF CREDITOR'S NAME, DATE CLAIM WAS JNLIQUIDATED CONTINGENT CODEBTOR **CLAIM MAILING ADDRESS** INCURRED AND DISPUTED INCLUDING ZIP CODE, CONSIDERATION FOR AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. ACCOUNT NO. 9824 Insurance 2011-12/30/15 Assurant Health 0.00 P.O. Box 624 Milwaukee, Wi 53201-0624 ACCOUNT NO. 083-9 Insurance 12/30/14-Blue Cross and Blue Shield of Illinois 2,500.00 P.O. Box 3239 Naperville, IL 60566-7240 Insurance ACCOUNT NO. 7441 8/14 until after 12/6/14 First Insurance Funding P.O. Box 66468 Chicago, Illinois 60666-0468 800.00 Medical ACCOUNT NO. 0160 11/5/14 to present Fabian Carbonell, MD SC 2,500.00 4250 N. Marine Drive Suite 236 Chicago, IL 60613 40/17 Subtotal> \$ 5,800.00 \$ continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	Debra V. Levine	,				
Debtor						

Case No.	15-26533	
	(if known)	

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7001  JP Morgan Chase Bank, N.A. Porfolio Management Center AZ1-1004 P.O. Box 29550 Phoenix, AZ 85038			Business Loan 2009? to 7/3/2015				48,488.00
ACCOUNT NO. 2155  First National Credit Card P.O. Box 2496 Omaha, NE 68103			Credit Card 1995-4/8/15				2,237.00
ACCOUNT NO.  LTD Financial Services Limited Partnership 7322 Southwest Freeway Sulte 1600 Houston, TX 77074-2053			Collection for First National Credit Card Service Only				
ACCOUNT NO.  Monadnock Building, Inc. 53 W. Jackson Blvd. Suite 850 Chicgao, IL 60606			2005 to 12/15/14 Office Rent			х	13,500.00
ACCOUNT NO. 0083  Pacer 7550 Interstate 10 West San Antonio, TX 78229			ECF 1999-Present				226.00
Sheet no. 5 of 17 continuation she to Schedule of Creditors Holding Unsecured Nonpriority Claims	eets attac	ched			Subt	otal➤	\$ 64,451.00
		(Report a	(Use only on last page of the o lso on Summary of Schedules and, if appl Summary of Certain Liabili	cable on	d Schedu the Stat	istical	\$

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B 6F (Official Form 6F) (12/07)

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Case No. 15-26533

(if known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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n re Debra V. Levine ,	Case No. 15-26533
Debtor	(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7-001			Medical				
Northwestern Memorial Hospital P.O. Box 73690 Chicago, IL 60673-7690							295.00
ACCOUNT NO.			Medical				
Northwestern Memorial Hospital P.O. Box 73690 Chicago, IL 60673-7690			Radiology				516.00
ACCOUNT NO.			Medical				
Northwestern Memorial Hospital P.O. Box 60673-7690							235.00
ACCOUNT NO.			Collection NU				
Harris & Harris 111 W. Jackson Blvd. Suite 400 Chicago, IL 60604-4135			Notice Only				
ACCOUNT NO.			Collection NU Notice Only				
Harris & Harris 111 W. Jackson Blvd. Suite 400 Chicago, IL 60604-4135		i.	24758432				
Sheet no. 7 of 17 continuation s to Schedule of Creditors Holding Unsecure Nonpriority Claims	heets atta	ached			Sub	total≻	\$ 1,046.00
		(Report	(Use only on last page of the also on Summary of Schedules and, if app Summary of Certain Liabi	licable o	ed Sched in the Sta	tistical	\$

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In re Debra V. Levine

Debtor

Doc 8

Case No. 15-26533

(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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☐ Check this box if debtor has no	credito	rs holding uns	secured claims to report on this Sched	ule F.			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Medical		***************************************		
Northwestern Medical Foundation 38693 Eagle Way Chicago, IL 60678-1386							235.00
ACCOUNT NO.			Medical				
Presence Medical Group 19 Mollison Way Lewiston, ME 04240-5805			11/5/14				2,000.00
ACCOUNT NO.			Medical				***************************************
Presense St. Joseph Hospital Patient Financial Services 621 17th Street Suite 1800 Denver, CO 80293			11/5/14				780.00
ACCOUNT NO.  Presense St. Joseph Hospital Patient Financial Services 621 17th Street Suite 1800 Denver, CO 80293			Medicial 11/5/14				110.00
80f 17	***************************************				Subt	otal≻	\$ 3,125.00
continuation sheets attached							

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In re_Debra V. Levine,	Case No. 15-26533
Debtor	(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 3122  Merchants Credit Guide Co. 233 Jackson Blvd. Suite 700 Chicago, IL 60606			Midwest Imaging Professionals, LLC at St. Joseph Hospital 08-150363122 11/5/14				36.00
ACCOUNT NO.  Presence Health Presence St. Joseph Hospital Patient Financial Services 621 17th Street Suite 1800 Denver, CO 80293			Medical 11/5/14				130.00
ACCOUNT NO.  Creditors Collection Bureau, Inc. P.O. Box 63 Kankakee, IL. 609-0063			Collectors for Presence St. Joseph Hospital File #5535896				708.00
ACCOUNT NO.  Creditors Collection Bureau P.O. Box 63 Kankakee, IL 60901-0063			Presence Medical Group File # 792918				202.00
ACCOUNT NO.							
Sheet no. 9 of 17 continuation st to Schedule of Creditors Holding Unsecure Nonpriority Claims	heets attaced	ched			Subt	otal➤	\$ 1,076.00
		(Report a	(Use only on last page of the also on Summary of Schedules and, if appl Summary of Certain Liabil	icable or	d Schedu the Stat	istical	\$

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In re Debra V. Levine ,	Case No. 15-26533
Debtor	(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO 5426			Collection for Ann Taylor				
Comity Bank P.O. Box 1822 Columbus, Ohio			Notice Only 6/22/15				
ACCOUNT NO. 9965			Utility				
People's Gas P.O. Box 19100 Chicago, IL 4013							120.00
ACCOUNT NO. 8671			Web-Site and Books				
Thompson Reuters-West Payment Center P.O. Box 6202 Carol Stream, IL 60197-6292							13,920.00
ACCOUNT NO.			Collection for West				
Michael T. Edmund Attorney for Plaintiff 150 South Fifth Street St. Suite 1200 Minneapolis, MN 55402-4129			Publishing				
ACCOUNT NO.  Moss & Barnett Michael T. Edmund 150 South Fifth St. Suite 1200 Minneapolis, MN 55402-4129			Collection for West Publishing d/b/a Thompson-Reuters West Notice Only				
Sheet no. 10 of 17 continuation s to Schedule of Creditors Holding Unsecure Nonpriority Claims	heets attac	hed	9 9 11 12 11 11	11	Subte	otal➤	\$ 14,040.00
		(Report a	(Use only on last page of the lso on Summary of Schedules and, if app Summary of Certain Liabil	licable on	d Schedu the Stati	stical	\$

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In re Debra V. Levine

Debtor		

Case No. 15-26533Ci

(if known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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In re Debra V. Levine	•				
Debtor					

Case No. <u>15-26533C</u>i (if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.  Katrina A. Cox 3365 S. Union Street #1 Chicago, IL 60616			Coverage Attorney				150.00
ACCOUNT NO.  Ruddy & King, LLC 2631 Ginger Woods Pky Suite 101 Aurora, IL 60502			Coverage Attorney			x	1,000.00
ACCOUNT NO.  Zia Llic Ltd. 180 N. LaSalle St. Suite 3700 Chicago, IL60601			Coverage Attorney	•			200.00
ACCOUNT NO.  NLO Nelson Law Office 53 W. Jackson Blvd. Suite 430 Chicago, IL 60606			Coverage Attorney				700.00
ACCOUNT NO.  Joeseph Finn E.L. Johnson Investigations, Inc. 53 W. Jackson Blvd. Suite 915 Chicago, IL 60604			Investigators				985.00
Sheet no. 12 of 17 continuation sl to Schedule of Creditors Holding Unsecure Nonpriority Claims	neets attac	hed			Subt	otal⊁	\$ 3,035.00
		(Report a	(Use only on last page of the c lso on Summary of Schedules and, if appli Summary of Certain Liabilii	cable on	d Schedu	istical	\$

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B 6F (Official Form 6F) (12/07) In re Debra V. Levine

Debtor

Case No. 15-26533

(if known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data...

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY CREDITOR'S NAME. DATE CLAIM WAS AMOUNT OF **JNLIQUIDATED** CONTINGENT CODEBTOR **MAILING ADDRESS INCURRED AND CLAIM** DISPUTED INCLUDING ZIP CODE, CONSIDERATION FOR AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Parking Violation ACCOUNT NO 096408A 8/10/15 City of Chicago 9189136685 Department of Revenue х 100.00 P.O. Box 88298 Chicago, IL 60608-1298 Home Goods ACCOUNT NO. 12/15 Home Depot 400.00 1232 North Ave. Chicago, IL 60642 Medical ACCOUNT NO. 6/21/15 Pathology CHP, S.C. 172.00 P.O. Box 1509 Elgin, IL 60121-1509 Coverage Attorney ACCOUNT NO. 5/15 Christina Banyon 150.00 15387 Silver Bell Road Orland Park, IL 60462 13 of 17 \$ 822.త Subtotal> continuation sheets attached \$ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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(if known)

B 6F (Official Form 6F) (12/07) In re Debra V. Levine

Debtor

Case No. 15-26533

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data...

nd Related Data			Landlin School	ule F			
☐ Check this box if debtor has no ct	reditors	holding unse	cured claims to report on this Sched	1			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.19801			Collection for Quest Diagnostics				
National Asset Manager, LLC P.O. Box 840 Moon Twp., PA 15108			11/4/14				225.00
ACCOUNT NO. 0224			12/3/14 Business Line				677.00
At&t P.O. Box 5014 Carol Stream, IL 60197-5014							077.00
ACCOUNT NO.			6/17/14				1 006 0
Firefly Network Services 353 N. Clark Street Suite 1800 Chicago, IL 60654							1,086.00
ACCOUNT NO.			Coverage Attorney 10/17/14				1,775.0
Kelly Johnson 2364 Essington Road #475 Joliet, IL 60435							
					5	Subtotal➤	\$ 3,763.0
14 o + 17continuation sheets attached		(Repo	(Use only on last page o ort also on Summary of Schedules and, if Summary of Certain l	anniicabi	e. on uic	Jeanstiem	1

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B 6F (Official Form 6F) (12/07) - Cont.

ln	re	Debra	V.	Levine	

Case	No.	15-26533
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Debtor

(if known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.09-31485			Civil Judgment				
Robert Gacuta						And Andrews in the second seco	800.00
ACCOUNT NO. 1(-04626			Civil Judgment				
Melanie Sharpe			·				3,500.00
ACCOUNT NO. 11-17734	·····	***************************************	Civil Judgment				
Jennifer & Israel Cal							1,500.00
ACCOUNT NO. 13-08882 Francisco & Maria Navarro			Civil Judgment				3,500.00
ACCOUNT NO.13-18697			Civil Judgment				
Suburban West Properties							700.00
Sheet no. 15 of 17 continuation she to Schedule of Creditors Holding Unsecured Nonpriority Claims	ets atta	ched			Sub	total➤	\$ 10,000.00
		(Report :	(Use only on last page of the also on Summary of Schedules and, if appl Summary of Certain Liabil	icable or	ed Sched 1 the Sta	tistical	\$

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In re	Debra	V.	Levine
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Case No.	15-26533
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Debtor

(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

		T		· · · · · · · · · · · · · · · · · · ·	1	1	I
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 14-09245							
Muriel & Michael Jenkins							500.00
ACCOUNT NO.14-10038							
Jessie Rodiguez							500.00
ACCOUNT NO. 14-12702							
Mark & Trina Coleman		felbritte i ferrit merker traken merker traken merker traken merker traken merker traken merker traken merker					615.00
ACCOUNT NO. 14-28626							
Edward & Doris Stasierowski							1,165.00
ACCOUNT NO. 14-29267							
Robert Murphy							630.00
Sheet no. 16 of 17 continuation sh to Schedule of Creditors Holding Unsecure Nonpriority Claims	neets atta	ached			Sub	total➤	\$ 3,410.00
	Fotal ➤ lule F.) tistical Data.)	\$					

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In re	Debra V	Levine		 
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Case No. 15-26533

Debtor

(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>14-35486</b>			Civil Judgment				
Steve & Beatrice Parker							1,200.00
ACCOUNT NO.14-38701			Civil Judgment				
Sandra Rosas		<u> </u>					1,500.00
ACCOUNT NO.							
Carol McGinnis							1,000.00
ACCOUNT NO.							
Elizabeth Passmore							300.00
ACCOUNT NO.							
					-		
Sheet no. 17 of 17 continuation to Schedule of Creditors Holding Unsecun Nonpriority Claims	sheets att	ached		<u> </u>	Sul	btotal➤	\$ 4,000.00
Honpronty Claims		(Report	(Use only on last page of the also on Summary of Schedules and, if app Summary of Certain Liab	olicable (	ted Sche on the St	atistical	\$ 220,580.0

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B 6G (Official Form 6G) (12/07)

In re Debra V. Levine	Case No. 15-26533
Debtor	(if known)

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
	UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS  AUG 1 9 2015
	JEFFREY P. ALLSTEADT, CLERK PS REP DDS

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Debtor

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B 6H (Official Form 6H) (12/07)

In re Debra V. Levine

Case No. 15-26533 (if known)

# SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR				
	UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS  AUG 19 2015				
	JEFFREY P. ALLSTEADT, CLERK PS REP DDS				

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B 6G (Official Form 6G) (12/07)

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In re Debra V. Levine ,	
Debtor	

(if known)

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Check this con a	
NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
	UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
	AUG 19 2015
	JEFFREY P. ALLSTEADT, CLERI PS REP DDS

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Fill in this information to identify	your case:			
Debtor 1 Debra First Name	V. Levine  Middle Name Last Name	Check if this	is:	
Debtor 2		An amen		
(Spouse, if filing) First Name	Middle Name Last Name	A suppler	nent showing post	petition chapter 13
United States Bankruptcy Court for the:	Northern District of Illinois	expenses 08/17/20	s as of the following	date:
Case number 15-26533		MM / DD /	YYYY	D 140
(If known)		A separa	te filing for Debtor : s a separate house	2 because Debtor 2 hold
Official Form B 6J		maintairis	s a separate nouse	,,,,,,,
Schedule J: Yo	ur Expenses			12/13
Be as complete and accurate as prinformation. If more space is need (if known). Answer every question	ossible. If two married people are fili ed, attach another sheet to this form	. On the top of any additional po	I L E	POURT
Part 1: Describe Your Hou	usehold	MONT	Lie Itra	CHao
1. Is this a joint case?			AUG 19 2015	
No. Go to line 2. Yes. Does Debtor 2 live in a		JEFFRE F	Y P. ALLSTEAD S REP D	T, CLERK DS
	le a separate Schedule J.	Hamanyayaya ista jaraharayay yaya ista araya ka a a a a a a a a a a a a a a a a a	A Sharest to common and a share common to the common to	nggara sang at termina menangkara sanggaran sanggaran sanggaran sanggaran sanggaran sanggaran sanggaran sangga
2. Do you have dependents?	✓ No	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent		Section and the section of the secti	No
Do not state the dependents'	5401 45p=1151			Yes
names.				No
				Yes
				No
			· · · · · · · · · · · · · · · · · · ·	Yes
				No
		**************************************		Yes
				No
		and the state of t	d months : Sulmannin et Summin : States and in prise	Yes
Do your expenses include expenses of people other than yourself and your dependents	No ? Yes			
Part 2: Estimate Your Ong	oing Monthly Expenses			
	bankruntau filina data uniess VOII	are using this form as a supple	ment in a Chapter 1:	3 case to report
expenses as of a date after the b applicable date.	ankruptcy is filed. If this is a suppler	mental <i>Schedule J</i> , check the bo	x at the top of the fo	rm and fill in the
Include expenses paid for with n	on-cash government assistance if y	ou know the value	Your ex	nenses
of such assistance and have inc	luded it on Schedule I: Your Income	(Official Form B 61.)	www.compeliates.com/schemes/compeliates.com/schemes/compeliates.com/schemes/compeliates.com/schemes/co	e accident construction de symphological descriptions descriptions de accident de la production de accident de
<ol> <li>The rental or home ownership any rent for the ground or lot.</li> </ol>	p expenses for your residence. Includ	de first mortgage payments and	4. \$	1,650.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	**************************************
4b. Property, homeowner's, o	or renter's insurance		4b. \$	
4c. Home maintenance, repa			4c. \$	
4d Homeowner's association			4d. \$	<u> </u>

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 Debtor 1
 Debra
 V.
 Levine
 Case number (# known)
 15-26533

			Your expenses
_	A 1751 and an arrange for your regidence, cuch as home equity loans	5.	\$
5.	Additional mortgage payments for your residence, such as home equity loans	0.	
6.	Utilities:		s 100.00
	6a. Electricity, heat, natural gas	6a.	\$ 100.00
	6b. Water, sewer, garbage collection	6b.	450.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 150.00
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$400.00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$100.00
10.	Personal care products and services	10.	\$30.00
11.	Medical and dental expenses	11.	\$ 300.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$ 450.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$400.00
	15c. Vehicle insurance	15c.	\$ <u>100.00</u>
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	\$
19.	Other payments you make to support others who do not live with you.	19.	\$
	Specify:	13.	Ψ
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inc	ome.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e Homeowner's association or condominium dues	20e.	\$

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	Debra		V.	Levine	Case number (if known	15-26	6533
Debtor 1	First Name	Middle Name	Last Name				
21. <b>Ot</b> r	er. Specify:					21.	+\$
	ur monthly exper					22.	\$3,680.00
23. <b>Calc</b>	ulate your mont			r . Och edule I		23a.	\$2,000.00_
23a. 23b.			monthly income) from line 22 abov			23b.	<b>-</b> \$3,680.00
23c.	Subtract your n		ses from your mor t income.	nthly income.		23c.	\$1,680.00
For	evamnle do vou	expect to finis	h paying for your	penses within the year a car loan within the year or of a modification to the te	after you file this form?  r do you expect your  erms of your mortgage?		
	Yes. Explain	here:					